

FILED

UNITED STATES DISTRICT COURT

for the
Western District of OklahomaCARMELITA REEDER SHINN, CLERK
U.S. DIST. COURT, WESTERN DIST. OKLA.
BY _____, DEPUTY

MAR. 31 2020

Stephen Wright

Plaintiff/Petitioner

v.

The State of Oklahoma

Defendant/Respondent

CIV 20

Civil Action No.

287

JD

APPLICATION TO PROCEED IN DISTRICT COURT WITHOUT PREPAYING FEES OR COSTS
(Short Form)

I am a plaintiff or petitioner in this case and declare that I am unable to pay the costs of these proceedings and that I am entitled to the relief requested.

In support of this application, I answer the following questions under penalty of perjury:

1. *If incarcerated.* I am being held at: _____

If employed there, or have an account in the institution, I have attached to this document a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months for any institutional account in my name. I am also submitting a similar statement from any other institution where I was incarcerated during the last six months.

2. *If not incarcerated.* If I am employed, my employer's name and address are:

Oklahoma Department of Transportation
200 NE 21st St, Oklahoma City, OK 73105

My gross pay or wages are: \$ 372.00, and my take-home pay or wages are: \$ 372.00 per
(specify pay period) total.

3. *Other Income.* In the past 12 months, I have received income from the following sources (check all that apply):

(a) Business, profession, or other self-employment	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(b) Rent payments, interest, or dividends	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(c) Pension, annuity, or life insurance payments	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(d) Disability, or worker's compensation payments	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(e) Gifts, or inheritances	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(f) Any other sources	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

If you answered "Yes" to any question above, describe below or on separate pages each source of money and state the amount that you received and what you expect to receive in the future.

4. Amount of money that I have in cash or in a checking or savings account: \$ 27.00.

5. Any automobile, real estate, stock, bond, security, trust, jewelry, art work, or other financial instrument or thing of value that I own, including any item of value held in someone else's name (*describe the property and its approximate value*):
I own nothing of value

6. Any housing, transportation, utilities, or loan payments, or other regular monthly expenses (*describe and provide the amount of the monthly expense*):
\$900 month rent, \$140 average utility for electricity, \$162 average for telephone, \$87 for Internet acces, average \$50 bus expenses, food expense is largely taken care of by SNAP,

7. Names (or, if under 18, initials only) of all persons who are dependent on me for support, my relationship with each person, and how much I contribute to their support:
Henry Wright 3, Alden Wright 1, Allena Berntsen 6. I contribute everything I have to their support.

My wife is using her student loans to pay for our bills until I can afford to do it.
My wife is not employed and has a mobility disability.

8. Any debts or financial obligations (*describe the amounts owed and to whom they are payable*):
\$62,971 in Student Loan Debt
\$20,000 or more owed in fraudulent debt being enforced and is subject matter in CIV-19-1071-JD, and of which there is a duplicate income withholding order in place ~~due to the Defendants action in that case.~~

It took me over a year to find a job, I had to move back to Oklahoma to get one, and now the Corona Virus is affecting my employment. I would earn roughly \$536 a week before taxes, but have not been able to work a full week due to the Corona virus timing and the start of my job.

I have no way to pay the fees for this case, and I will have a way in the foreseeable immediate future.

Declaration: I declare under penalty of perjury that the above information is true and understand that a false statement may result in a dismissal of my claims.

Date: 3/31/2020


Applicant's signature

Printed name